DBHDS
Virginia Department of
**Behavioral Health and
Developmental Services**

LICENSING INTENSIVE IN-HOME SERVICES GUIDANCE

This guidance document is designed to help Intensive In-Home Service programs work within DBHDS regulations and is not intended to replace or supersede program regulations. Programs should also be familiar with Department of Medical Assistance (DMAS) regulations on Intensive In-Home Services as well as requirements outlined in the DMAS CMHRS provider manual. This DBHDS guidance document is applicable to all Intensive In-Home cases regardless of funding source.

PROGRAM OVERSIGHT
1. All programs must have a Licensed Mental Health Professional (LMHP) who is responsible for the clinical oversight of the program. If the LMHP is a contractor there must be a written agreement in place between the LMHP and Provider outlining the duties and responsibilities of the LMHP and the amount of time dedicated to the program.

STAFF QUALIFICATIONS
1. Intensive in-home services can only be provided by individuals who meet the DMAS and DBHDS definition of a Qualified Mental Health Professional (QMHP) or Licensed Mental Health Professional (LMHP).
2. The maximum number of cases that the QMHP can carry at one time is five (5). If one case is transitioning out of Intensive In-Home the caseload can be up to six (6) for up to 30 days.
3. An LMHP or a person who has been approved by the applicable Virginia Health Regulatory Board as a supervisee in clinical social work or a resident in clinical psychology, professional counseling, substance abuse treatment practice, or marriage and family therapy may perform the functions of the LMHP. The supervisee or resident must be in continuous compliance with the applicable board's requirements for supervised practice. These persons shall use the title "Supervisee" or "Resident" in connection with the applicable profession after their signatures to indicate such status. An individual may not perform the functions of the LMHP or be considered a "Supervisee" or "Resident" until the supervision for specific clinical duties at a specific site is pre-approved in writing by the appropriate Virginia Health Regulatory Board.

ASSESSMENT
1. Data documenting the need for intensive in-home services (eligibility information based on medical necessity) is a required part of the assessment. The assessment including diagnosis must be done by an LMHP or Supervisee/Resident.

2. Assessment by the intensive in-home program LMHP or Supervisee/Resident must be done face-to-face with both the child and family prior to starting services. The assessment should usually be done in the family home.
3. Additional assessment time for specific elements can be incorporated into the initial service plan (ISP) as long as the service plan is updated upon completion of this assessment element.
4. If the Supervisee/Resident performs the assessment, the assessment must be reviewed with the LMHP and signed off on by the LMHP within 24 hours of the assessment being conducted.

SUPERVISION
1. Given the intensive nature of the program the maximum number of supervisee that a full-time clinical supervisor (LMHP or Supervisee/Resident) can oversee is eight (8) to ten (10) counselors. Supervisors that are working half-time can oversee a maximum of four (4) to five (5) supervisees. If a supervisor is less than half time, check with your licensed specialist for guidelines.
2. In general a supervisor working less than half time can supervise no more than two (2) counselors.
3. Clinical supervision must be face-to-face and provided weekly, with individual supervision at least every other week.
4. The clinical supervisor is to be available for phone consultation with staff as needed.
5. Clinical supervision is to be documented by the LMHP or Supervisee/Resident providing the supervision. A supervision log or note should be placed in the client's file documenting that supervision was provided. A more detailed note written by the supervisor summarizing the meeting and noting any recommendations must be maintained in a separate supervisor's file. A checklist may be used but is not sufficient.
6. A QMHP who is not a LMHP or Supervisee/Resident can provide administrative supervision only. They cannot provide clinical supervision.

TREATMENT
1. The intensive in-home program is responsible for addressing the clinical needs of the child and family. It is expected that the clinical staff will have the appropriate skills, training, and supervision to accomplish this responsibility. Providing limited services to the child and family that does not address all of their clinical needs is not acceptable. If the services are outside the scope of intensive in-home services, such as services for a parent who is Seriously Mentally Ill, an appropriate referral should be made. When counseling/therapy is required to address the clinical issues, the intensive in-home program is responsible for either providing counseling/therapy or arranging for an outside counselor/therapist. All counseling/therapy must be provided by an LMHP or Supervisee/Resident.
2. The intensive in-home program is not expected to directly provide psychiatric evaluation and medication. The program is responsible for facilitating a referral if the child's clinical needs require psychiatric evaluation and treatment.

CONDITIONAL LICENSE
1. A conditional license is issued for a period of six (6) months. An additional six month conditional license may be issued after that period based on the program's ability to maintain compliance with all licensing regulations. During the conditional licensing period, the program cannot expand locations. This means they can not serve children outside the region they are licensed for. In addition the program cannot serve more than thirty-five (35) clients at a time.
2. Once the program is allowed to expand they must submit a Service Modification request to their Licensing Specialist. No services can be provided until the Service Modification is approved. An affiliation with an LHRC in the new region is required prior to the Service Modification being approved.

Please feel free to contact your Licensing Specialist if you have any further questions